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Approved for use through 09/30/2000. OMB 6551-659

Patent and Trademark Office: U.S. DEPARTMENT OF COMMENT O Attorney Docket No. 20-0153

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No. EK745229132US

First Inventor or Application Identifier Michael H. Myers

Title | See 1 in Addendum

| Δ | APPLICATION ELEMENTS ADDRESS TO: Assistant Commissioner for Patents | | | | | | |
|--|--|--|---|--|--|--|--|
| | apter 600 concerning utility patent application contents. | 4 | ADDRESS TO: Box Patent Application Washington, DC 20231 | | | | |
| 1 1 1 1 | ee Transmittal Form (e.g., PTO/SB/17) Ibmit an original and a duplicate for fee processing) | 5. | Microfiche Computer Program (Appendix) | | | | |
| [] ` | ecification [Total Pages o | | Nucleotide and/or Amino Acid Sequence Submission | | | | |
| •• | eferred arrangement set forth below) | | (if applicable, all necessary) a. Computer Readable Copy | | | | |
| | escriptive title of the Invention ross References to Related Applications | | | | | | |
| | tatement Regarding Fed sponsored R & D | | b. Paper Copy (identical to computer copy) | | | | |
| - R | eference to Microfiche Appendix | | c. Statement verifying identity of above copies | | | | |
| | ackground of the Invention | | ACCOMPANYING APPLICATION PARTS | | | | |
| | rief Summary of the Invention rief Description of the Drawings (<i>if filed</i>) | 7. | X Assignment Papers (cover sheet & document(s)) | | | | |
| | etailed Description | آ ۾ آ | 37 C.F.R.§3.73(b) Statement X Power of Attorney | | | | |
| - Claim(s) | | | <u> </u> | | | | |
| A | bstract of the Disclosure | 9.[| English Translation Document (if applicable) Information Disclosure Copies of IDS | | | | |
| 3. X Dra | awing(s) (35 U.S.C. 113) [Total Sheets 2] | 10. | Information Disclosure Copies of IDS Citations | | | | |
| 4. Oath or [| Declaration [Total Pages 3] | 11. | Preliminary Amendment | | | | |
| a. 🖸 | X Newly executed (original or copy) | 12. | X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | |
| b . | Copy from a prior application (37 C.F.R. § 1.63((for continuation/divisional with Box 16 completed) | '" ІГ | * Small Entity Statement filed in prior application | | | | |
| | i. DELETION OF INVENTOR(S) | 13. | Statement(s) Status still proper and desired | | | | |
| | Signed statement attached deleting | 14. | Certified Copy of Priority Document(s) (if foreign priority is claimed) | | | | |
| | see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). Other: | | | | | |
| " <u>NOTE FOR I</u> FEES, A SMA | TEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY L ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT | | | | | | |
| IF ONE FILE | D IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. & 1.28). | | | | | | |
| | | | | | | | |
| | | JIP) | | | | | |
| For CONTINU | ATION or DIVISIONAL APPS only: The entire disclosure | CATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: ivisional Continuation-in-part (CIP) of prior application No:/ Examiner Group / Art Unit: AL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied to of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by | | | | | |
| | | | n inadvertently omitted from the submitted application parts. | | | | |
| | 17. CORRESPOND | ENCE / | ADDRESS | | | | |
| Custom | er Number or Bar Code Labe I | | or 🛛 Correspondence address below | | | | |
| | | or 🗵 Correspondence address below (Insert Customer No. or Attach bar code label here) | | | | | |
| Name | Patent Counsel | | | | | | |
| | TRW Inc. | | | | | | |
| Address | Law Department, E2/6051 | | | | | | |
| | One Space Park | | | | | | |
| City | Redondo Beach State | CA | Zip Code 90278 | | | | |
| Country | Telephone | 310-8 | 12-4910 Fax 310-812-2687 | | | | |
| Name (F | Name (Print/Type) Michael S. Yatsko Registration No. (Attorney/Agent) 28,135 | | | | | | |
| Signature Mulicul S. Ycethar Date 12/13/00 | | | | | | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Attachment to PTO/SB/05 (4/98) Utility Patent Application Transmittal

1. QUADRATURE ERROR REDUCTION FOR QAM MODULATED UP OR DOWN CONVERSION





PTO/SB/17 (12/99)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)750.00

| Complete if Known | | | | |
|----------------------|-------------------|--|--|--|
| Application Number | | | | |
| Filing Date | December 14, 2000 | | | |
| First Named Inventor | Michael H. Myers | | | |
| Examiner Name | Not Assigned | | | |
| Group / Art Unit | N/A | | | |
| Attorney Docket No. | 20-0153 | | | |

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | | |
|--|---|----------|--|--|--|--|--|
| 1. X The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to | | | | | | | |
| Large Entry Small Entry | | | | | | | |
| Deposit Account 20-1515 | Code (\$) Code (\$) | Fee Paid | | | | | |
| Number 20-1313 | 105 130 205 65 Surcharge - late filing fee or oath | 0.00 | | | | | |
| Deposit | 127 50 227 25 Surcharge - late provisional filing fee or cover sheet. | 0.00 | | | | | |
| Account Name TRW Inc. | | 0.00 | | | | | |
| Channe Ann Additional Fee President | 139 130 139 130 Non-English specification | | | | | | |
| Under 37 CFR §§ 1.16 and 1.17 | 147 2,520 147 2,520 For filing a request for reexamination 112 920* 112 920* Requesting publication of SIR prior to | 0.00 | | | | | |
| 2. Payment Enclosed: | Examiner action | 0.00 | | | | | |
| Check Money Other | 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action | 0.00 | | | | | |
| FEE CALCULATION | 115 110 215 55 Extension for reply within first month | 0.00 | | | | | |
| · | 116 380 216 190 Extension for reply within second month | 0.00 | | | | | |
| 1. BASIC FILING FEE Large Entity Small Entity | 117 870 217 435 Extension for reply within third month | 0.00 | | | | | |
| Fee Fee Fee Fee Description | 118 1,360 218 680 Extension for reply within fourth month | 0.00 | | | | | |
| 404 000 204 245 1 William Silver Silver Silver | 128 1,850 228 925 Extension for reply within fifth month | 0.00 | | | | | |
| 106 310 206 155 Design filling fee 710.00 | 119 300 219 150 Notice of Appeal | 0.00 | | | | | |
| 107 480 207 240 Plant filing fee | 120 300 220 150 Filing a brief in support of an appeal | 0.00 | | | | | |
| 108 690 208 345 Reissue filing fee | 121 260 221 130 Request for oral hearing | 0.00 | | | | | |
| 114 150 214 75 Provisional filing fee | 138 1,510 138 1,510 Petition to institute a public use proceeding | | | | | | |
| | 140 110 240 55 Petition to revive - unavoidable | 0.00 | | | | | |
| SUBTOTAL (1) (\$) 710.00 | 141 1,210 241 605 Petition to revive - unintentional | 0.00 | | | | | |
| 2. EXTRA CLAIM FEES Fee from | 142 1,210 242 605 Utility issue fee (or reissue) | 0.00 | | | | | |
| Ext <u>ra Claims below</u> Fee Paid | 143 430 243 215 Design issue fee | 0.00 | | | | | |
| Total Claims 14 -20** = 0 | 144 580 244 290 Plant issue fee 122 130 122 130 Petitions to the Commissioner | 0.00 | | | | | |
| Claims Multiple Dependent 2 - 3** = 0 | 400 50 400 50 | 0.00 | | | | | |
| **or number previously paid, if greater; For Reissues, see below | 100 240 100 240 | 0.00 | | | | | |
| Large Entity Small Entity | Submission of information disclosure Sum | 0.00 | | | | | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) | 581 40 581 40 Recording each patent assignment per property (times number of properties) | 40.00 | | | | | |
| 103 18 203 9 Claims in excess of 20 | 146 690 246 345 Filing a submission after final rejection | 40.00 | | | | | |
| 102 78 202 39 Independent claims in excess of 3 | (37 ČFR § 1.129(a)) | 0.00 | | | | | |
| 104 260 204 130 Multiple dependent claim, if not paid | 149 690 249 345 For each additional invention to be examined (37 CFR § 1.129(b)) | 0.00 | | | | | |
| 109 78 209 39 ** Reissue independent claims over original patent | Other fee (specify) | 0.00 | | | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | Other fee (specify) | 0.00 | | | | | |
| | | | | | | | |
| SUBTOTAL (2) (\$) 0.00 | Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) | 40.00 | | | | | |
| SUBMITTED BY Complete (if applicable) | | | | | | | |
| Name (Print/Type) Michael S. Yatsko, Registration No. (Attorney/Agent) 28,135 | | | | | | | |
| Signature Mulaul S. With Date 17/13/10 | | | | | | | |

| SUBMITTED BY | | Complete (if applicable) | | |
|-------------------|--------------------|--|-----------|--------------|
| Name (Print/Type) | Michael S. Yatsko, | Registration No. (Attorney/Agent) 28,135 | Telephone | 310-812-4910 |
| Signature | Muhal S. Ya | \triangleright | Date | 12/13/60 |
| | WARNING: | | | |

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